

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10 523084

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	✓	✓	✓			
2		✓				
3		✓				
4		✓				
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TOTAL IND.	1	↓	1	↓		↓
TOTAL DEP.	7	←	26	←		←
TOTAL CLAIMS	8	⊞	27	⊞		⊞

PTO-875 (REV. 11-94)

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS		⊞		⊞		⊞

U.S. DEPARTMENT of COMMERCE